

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

The assumed business name which the unders business is:	signed use(s) in the transaction of
2. The true name(s) and <u>business</u> address(es) of business under the assumed business name: Name Elizabeth Trosky	Complete Address 5570. S. MERIDIAN RD MERIDIAN, ITO 83642
3. The general type of business transacted under Retail Trade Transportation and Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Elizabeth Tracky STRIDIAN ID 83643	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
 Name and address for this acknowledgment copy is (if other than # 4 above): 	Phone number (optional): 208 888 0357
	Secretary of State use only
Signature: Elaboration (signature required) Printed Name: Elaboration TROSK Capacity/Title: 100 FR President (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE ### DEPT. 12/2004 #5: 00 CK: 1771 CT: 158810 BH: 727184 1 9 25.00 = 25.00 ASSUM NAME # 2